STATEMENT OF

FEC FORM 1		0	RGAN	IZATI	ON				
1. NAME OF			Check if name	e Ex	ample:If typing, type	A STATE OF THE STA	fundrada.	ffice Use Only	·
1. NAME OF COMMITTEE (in full)			s changed)		or the lines.	12F1	E4M5		
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ADDRESS (number a	nd street)	1504	S. Ho	uston	Street	111	 i		
(Check if an is changed)		Kaul	man			TX	<u> 7</u>	5142	 J
				CITY		STATE		ZIP C	ODE
COMMITTEE'S E-MA	IL ADDRE	SS (Please	provide only o	one e-mail a	ddress)				
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2. DATE 10	7 70	0" 20)12.						
3. FEC IDENTIFIC	CATION N	UMBER	Ċ	0052	6897				
4. IS THIS STATE	MENT [NEW	(N) O	R D	AMENDED (A	A)			
I certify that I have o	examined t	his Stateme	ent and to the	best of my	knowledge and bel	lief it is true,	correct and	d complete.	
Type or Print Name	of Treasure	, Juli	e Cara	mante)				
Signature of Treasure	er <u></u>	Jul	ie Co	<u>w</u>	nante	Date	10"	10	2012
NOTE: Submission of	false, erron			-	bject the person sign	•		penalties of	2 U.S.C. §437g.
Office Use					For further informat Federal Election Com Toll Free 800-424-953	mission		FEC FO	I

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FEC	Form 1 (Revised 02/2009)	Page 2			
	F COMMITTEE				
r	late Committee:				
(a) [This committee is a principal campaign committee. (Complete the candidate information below.)				
(b) _	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate			
Name of Candidat		providence.			
Candida Party Aff		State manufacture state of the			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidat					
Party (Committee:				
(d)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Democratic, Republican, etc.) Party.			
Politica	al Action Committee (PAC):				
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected organization is a			
	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registraot PAC.	ocoporativo			
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party			
	In addition, this committee is a Lobbyist/Registrant PAC.				
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint F	undraising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a footoal candidate.	vo or more political			
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
(Committees Participating in Joint Fundraiser				
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		विकास स्वीतः स्वारं राज्यानंत्रायः स्वीतः स्वारं विकास स्वीतः स्वारं इत्यानम्बद्धाः स्वतः स्वारं स्वारं व्यापना स्वीतः स्वारं स्वीतः स्वीतः स्वारं स्वारं स्वारं स्वारं स्वारं स्वार			
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Wi	Write or Type Committee Name					
MONTANA HORSE ASSOCIATION						
6.	Name of Any Conr	nected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership P	AC Sponsor			
n	on e	<u> </u>				
L						
	Mailing Address					
]-			
		CITY STATE ZIP	CODE			
	Relationship: C	Connected Organization Affiliated Committee Joint Fundraising Representative Leaders	hip PAC Sponsor			
7.	Custodian of Records.	ords: Identify by name, address (phone number optional) and position of the person in possess	ion of committee			
	Full Name	Paula Bacon				
	Mailing Address	1504 S. Houston Street				
	-					
		Kaufman TX 75142	<u> </u>			
	Title or Position	CITY STATE ZIP	CODE			
	Custodian o	of Records Telephone number 972 - 824	J-[<u>1073</u>]			
		name and address (phone number optional) of the treasurer of the committee; and the name a nt (e.g., assistant treasurer).	and address of			
	Full Name of Treasurer	Julie Caramante				
	Mailing Address	1504 S. Houston Street				
		Kaufman TX 75142]-[
_	Title or Position Treasurer	CITY STATE ZIP (CODE			

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Full Name of Designated Agent	Paula Bacon	
Mailing Address	1504 S. Houston Street	
	Kaufman TX	75142 -
Title or Position	reasurer	972-824-1073 _
i polotaile il	Telephone number	
	Depositories: List all banks or other depositories in which the committee depo	•
Name of Bank, D	xes or maintains funds. Depository, etc. JPMorgan Chase Bank	
Name of Bank, D	Depository, etc.	
Name of Bank, D	Pepository, etc. Populari Chase Bank	
Name of Bank, D	Pepository, etc. Populari Chase Bank	
Name of Bank, D	JPMorgan Chase Bank [811 Preston Road]	75225
Name of Bank, D	JPMorgan Chase Bank 811 Preston Road Dallas CITY STATE	
Name of Bank, D	JPMorgan Chase Bank 811 Preston Road Dallas CITY STATE	
Name of Bank, D	JPMorgan Chase Bank 811 Preston Road Dallas CITY STATE	
Name of Bank, D	Depository, etc. JPMorgan Chase Bank 811 Preston Road Dallas CITY STATE Depository, etc.	ZIP CODE
Name of Bank, D	Depository, etc. JPMorgan Chase Bank 811 Preston Road Dallas CITY STATE Depository, etc.	ZIP CODE

Federal Election C ENVELOPE REPLACEMENT PAGE F The FEC added this page to the end of this	FOR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or S	Signature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registra	Date of Receipt tion Office
Received from Senate Public Records Offi	Date of Receipt ice
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
DV	10/18/2012
PREPARER (2/2005)	DATE PREPARED
(3/2005)	